

TOWN OF UPTON, MASSACHUSETTS TREASURER/COLLECTOR

REQUEST OF TAX INFORMATION

| Name | Date |
|-----------------------------------|---|
| | |
| Address | Telephone |
| | |
| Email Address | |
| (All completed reques | ts will be emailed unless otherwise instructed) |
| | |
| Real Estate Ta | ax Paid During Calendar Year |
| | |
| Property Location | |
| | |
| Exact Name of Owner on Vehicle Re | gistration(s) |
| Vara O Mala | District. |
| Year & Make | Plate # |
| Voar & Mako | Plate # |
| Teal & Wake | riate # |
| Year & Make | Plate # |
| | |
| Other | |
| | |
| Signature of Requestor | |

If you would like the information mailed, please include a self-addressed stamped envelope

Massachusetts General Law allows ten (10) working days